Kentucky e-Health Network Board
December 3, 2008
Minutes

Meeting No. 27	Capitol Annex – Room 129	3:00 pm – 4:30 pm

Board Members in Attendance:
Dr. Carol Steltenkamp, Co-Chair – University of Kentucky
Dr. Larry Cook, Co-Chair – University of Louisville
Jim Barnhart – Commonwealth Office of Technology
Lee Barnard, Proxy for Betsy Johnson, Commissioner - Kentucky Department of Medicaid Services
David Bolt – Physician Practice Managers
Charlie Kendall, Proxy for Dr. William Hacker, Commissioner - Kentucky Department of Public Health
Bruce Klockars – Kentucky Hospital Association & Rural Hospitals
Linda Linville, Proxy for Interim Council President Dr. Richard Crofts - Kentucky Council on Postsecondary Education
Janna Meek, Proxy for Jack Lord – Health Insurance Business Headquartered in Kentucky
Larry Mott - Business with Large Scale e-Strategy & Computer Information Technology
Warren Nash, Proxy for Deborah Clayton – Kentucky Department of Commercialization & Innovation
William Nold, Proxy for Sharon Clark, Executive Director - Kentucky Department of Insurance
Senator Katie Stine – Senate President Pro Tem
Dr. Kimberly Williams – Kentucky Medical Association

Absent:
Barbara Haunz Asher – Citizen at Large
Dr. David Bensema – Kentucky Medical Association
Dr. Ford Brewer – Associated Industries of Kentucky
Murray Clark – Kentucky Hospital Association
Senator Julie Denton - Senate
Rep. Bob DeWeese – House of Representatives
Janie Miller, Secretary - Cabinet for Health and Family Services
Rep. Tommy Thompson – House of Representatives

Staff:
Barbara Baker, Policy Advisor
Laura Cole, Project Manager
April Smith, Project Manager
Donna Veno, Assistant

The meeting was called to order by Dr. Carol Steltenkamp, Co-Chair.

Welcome and Introductions
Board members were asked to provide introductions. Dr. Kimberly Williams announced that the North East Kentucky RHIO has developed a website and have seated their Board and are seeking seed funding. Janna Meek announced that she has joined the Board of Directors of HealthBridge. David Bolt noted that his practice is converting their current EMR system to a new system.

Review and Approval of October Board Minutes
David Bolt moved to approve the October board minutes; Dr. Steltenkamp seconded the motion. Motion carried.

Innovations and Best Practices

Dr. Larry Fields, Past President of the American Academy of Family Physicians and a private practice family physician from Ashland, and Mr. Gerry Stover, Executive Vice President of the Kentucky Academy of Family Physicians updated the Board on the Patient Centered Primary Care Collaborative. The Collaborative is a coalition of major employers, consumer groups, organizations representing primary care physicians, and other stakeholders who have come together to advance the patient centered medical home.

A patient-centered medical home integrates patients as active participants in their own health and well-being. Patients are cared for by a personal physician who leads the medical team that coordinates all aspects of preventive, acute and chronic needs of patients using the best available evidence and appropriate technology. These relationships offer patients comfort, convenience and optimal health throughout their lifetimes.

The following standards have been developed in coordination with the NCQA for becoming a medical home.

- Access and Communications – You are required to have an electronic health record.
- Patient Tracking and Registry Functions
- Care Management
- Patient Self-Management Support
- Electronic Prescribing
- Test Tracking
- Referral Tracking
- Performance Reporting and Improvement
- Advanced Electronic Communications

The presentation can be found at http://ehealth.ky.gov.

Project Reports

- e-Prescribing Round II Final Report
  Laura Cole presented the final report of the e-Prescribing Round II Grant Awards where the Cabinet and the Board distributed $335,000 in grant funding to encourage health information technology adoption and develop relationships and work patterns that support electronic information sharing among healthcare entities.

- 2008 Annual Report
  Barbara Baker informed the Board that staff was preparing the 2008 Annual Report which will be distributed when completed.

Healthcare Infrastructure Authority

Dr. Steltenkamp reported that the Authority, representatives from the University of Kentucky and the University of Louisville as well as other volunteers, continue to work with the Ad Hoc Governance Group on governance issues. They have also been reviewing funding opportunities that were provided by Deborah Clayton and the Economic Development Committee.

Ad Hoc Governance Group

Dr. Bob Esterhay updated the Board on the recommendations from the Ad Hoc Governance Group. The first recommendation was an e-health governance structure that would promote the highest level of trust among all the stakeholders. To achieve that, it was decided to state and actually pass to the Board, for the Board's consideration and adoption, e-health guiding principles. These principles came up during a long period of discussion between the Lt. Governor and the universities through the Healthcare Infrastructure Authority. Many of these ideas and statements came up through an RFI process that the Cabinet for Health and Family Services ran over a period of time, and finally some of these crystallized at the July Retreat sponsored by the Healthcare Infrastructure Authority.

The following recommendations were identified at the last Ad Hoc Governance Group meeting:

- **The Kentucky e-Health Network Board should ask the Kentucky e-Health Corporation Board to dissolve itself and the Kentucky e-Health Corporation.**
  Only the Kentucky e-Health Corporation Board has the ability to do that.

- **The Kentucky e-Health Network Board should be balanced between public and private representation.**
  In addition, there should be a formal committee structure added for e-health implementation and operations. If in fact the e-Health Corporation Board is dissolved, which was based on operations, then that operations capability needs to be put into the e-Health Network Board. Additional committees that the Kentucky e-Health Network Board should consider for formal operations include: Executive Committee to meet between board meetings; Strategic Planning Committee; Operations Committee; Ethics and Finance; Compensation; Bylaws Committee; and other committees as needed. RHIOs could be represented on selected committees, particularly the Operations Committee.

- **The Kentucky e-Health Network Board should adopt strong conflict of interest and ethics policies.**
  The State already has such conflict of interest and ethic policy approaches; however, they need to be more rigorous. This could be accomplished by addressing the bylaws. In addition, all Board members should be required to reveal any potential conflicts of interest annually.

There was a lengthy discussion on the suggested recommendations. Dr. Cook stated it was his understanding that if the e-Health Corporation was dissolved, there would be recommendations regarding restructuring and that the e–Health Corporation was established in order to accept non-governmental funds. Dr. Esterhay indicated that the e-Health Network Board can do that as well. The Ad Hoc Governance Group felt that since the Corporation had no money, no purpose, no vision, no mission, no project, and a lot of the same people were serving on both the Corporation and the Board, it was confusing to people why there should be both a Corporation and a Board. The advantages that were thought to be with the Corporation really are not there. The whole idea was to create a balanced, public/private corporation where Kentucky State Government was a stakeholder in that Board and not controlling the Board and that would bring comfort to the private sector in terms of private investment dollars.

Dr. Williams stated there was another reason that the Corporation was developed and it was simply a logistical one because of the scope of the operational component of a statewide network. The makeup of the e-Health Network Board did not have the capacity to run such an operation. Dr. Esterhay responded by stating that the idea is to move and create the operational committees under the Board if the Corporation is dissolved. Dr. Cook has concern over forming five or six more committees due to the number of principles represented with proxies, not just at today's meeting but on a chronic basis.

David Bolt voiced his concern over standards and guideline development being lumped in the operations committee. While these committees are be debated, there are low-hanging fruit that could be focused on such as private physicians taking advantage of the KIH contract where there is significant savings.

Dr. Williams felt that there was more enthusiasm and better private representation on the Corporation then the e-Health Network Board. The Corporation's work got arrested and there was perceived conflicts of interest in the membership. Consequently, some members of the e-Health Network Board have lost interest, see nothing being done, and have designated proxies to represent them or have quit coming to meetings.

Bruce Klockars felt that the organization of the Corporation Board and the development of committees should not take place without first having a true strategic plan in place.

Dr. Cook suggested that staff ask the Commonwealth attorneys to determine whether the Board does or does not have enough flexibility to accept private contributions and to reasonably manage the

money. He also asked staff to review Senate Bill 2 and current articles and bylaws to see if the Board has the authority to establish committees without going back to the legislature for permission to establish. Dr. Esterhay stated that conflicts of interest can be handled by the bylaws and the Board has control of them. The bylaws should also be reviewed to determine flexibility to replace people who haven't shown up in a year.

It was recommended that the Ad Hoc Governance Group be tasked with the following:

- Request an opinion, through the appropriate channels to the Attorney General's Office, to determine whether the e-Health Network Board does or does not have enough flexibility to accept private contributions and to reasonably manage the money.
- Work with the members of the e-Health Network Board within personal communications to get opinions and bring back that communication to the Board.
- Establish a plan for the membership of the e-Health Network Board to reveal any true or perceived conflicts of interest.
- Review Senate Bill 2 and current articles and bylaws of the e-Health Network Board to see if the Board has the authority to establish committees without going to the legislature for permission to establish.

Janna Meek commented that the e-Health Guiding Principles presented by the Ad Hoc Governance Group were well received.

Next Board Meeting
The next meeting of the Board is scheduled for January 7, 2009 from 3:00 – 4:30 PM at the Capitol Annex, Room 129.

Submitted by Donna Veno
December 28, 2008